110000015470

(Re	questor's Name)		
١٨٨	dress)		
(Ad	aressj		
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
. (Bu	siness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to	Filing Officer:		
	•		

Office Use Only



900170882549

03/15/10--01050--028 **150.00

T. CLINE

MAR 1 6 2010

EXAMINE

SECRETARY OF STATE

COVER LETTER

10:	Division of Corp					
SUBJECT: SONDISHAM REALTY INVESTMENTS 3 LLC						
		Name of Limi	ted Liability Company			
The end	losed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please r	eturn all correspon	ndence concerning this matter	to the following:			
		EDUA	ARDO E. DIEPPA III ESQ.			
			Name of Person			
		DII	EPPA LAW FIRM P.A.			
			Firm/Company			
2095 WEST 76 STREET						
			Address			
			HIALEAH FL 33016			
			City/State and Zip Code			
		E-mail address: (PPA@DIEPPALAW.COM to be used for future annual report notil	ication)		
For furt	her information co	oncerning this matter, please of	·	ŕ		
	EDUARDO	E. DIEPPA III ESQ.	at (305)	826-8266		
	Name of	Person		e Telephone Number	2010 SE(
					2010 MAR 15 SECRETARY	T
Enclose	d is a check for th	e following amount:			AR 15	
₹ \$25	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	 Certified C 	of Status & T	
	Registra Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SONDISHAM REALTY INVESTMENTS 3 LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _______02/10/2010 and assigned Florida document number __LIODOO __SU70_____.

This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited 1	iability company here:	
The new name must be distinguishable and end with the words "L" "L.L.C."	imited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered registered agent and/or the new registered office address.	office address on our reco	2010 HAR 15 PR 2: 24 SECRE TARY OF TATE TALLAHASSEE. France the ORIDA ords, enter the ORIDA
Name of New Registered Agent:		
New Registered Office Address:	Enter Flori	ida street address
		_, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title ·	<u>Name</u>	Address	Type of Action
MGRM	SONDISHAM REALTY INVESTMENTS LLC	175 FONTAINEBLEAU BLVD 2A5 MIAMI FL 33172	Add Remove
<u>MGRM</u>	ROBERTO DE MIZRAHI	175 FONTAINEBLEAU BLVD 2A5 MIAMI FL 33172	Add Z Remove
MGR	ROBERTO DE MIZRAHI	175 FONTAINEBLEAU BLVD 2A5 MIAMI FL 33172	✓ Add Remove
MGRA	ANDRES KORDA	SAME AS ABOVE	Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary)	SECRETARY OF STATE
Dated	3 11 , 20	or authorized representative of a member	
		NDRES KORDA or printed name of signee	
	I ypeu	or printigal name of organoc	

Page 2 of 2

Filing Fee: \$25.00